

01/11/05 TUE 13:10 FAX

Please type a plus sign (+) inside this box

PTO/SB/08A (08-00)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a

Substitute for form 1449APTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 2

**Complete If Known**

Application Number	09689,700
Filing Date	10-13-2000
First Named Inventor	Rolison
Group Art Unit	1745
Examiner Name	Bos
Attorney Docket Number	79,854



RECEIVED  
FEB 06 2002  
TC 1700

**FOREIGN PATENT DOCUMENTS**

Examiner  
Signature

John Feltz

Date  
Considered

11105

**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 18 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

number of the patent document. "Any or all of the above may be checked if possible. \*Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

number of the patient document. \*Kind of document to be supplied  
possible. \*Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231.

**MAIL TO THIS ADDRESS, SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.

Dug

